

Mail this application to:

The name of the waitlist I'm applying for is: _____

Some waitlists are closed: Before sending this application, check <http://www.housingworks.net/> to see what is open

You **must** answer every question on this application: respond to questions that are not applicable by writing "N/A".
Incomplete applications may be returned or discarded.

Name of HoH: _____

Long-Term Mailing Address _____

City/State/Zip: _____
(this address should ideally work for the next 3-5 years):

Phone(s): _____ - _____ - _____ _____ - _____ - _____

Email: _____

The **SSN** for the head of household is: _____

Does the HoH have a **Social Security Number (SSN)**? ☐ Yes ☐ No *If "Yes" you must provide it above).*

What is your **date of birth**? _____ What is your **gender**? _____

Race (white, black, asian, etc)? _____

What was your **mother's last name** when she was born? *Protects your privacy*) _____

How many people will be living in the unit? _____ people. What **unit size** are you seeking? _____ BR

Describe your **Income Sources** (Job, Food Stamps, SSI, TAFDC, etc.) _____

What is your family's **ANNUAL** income? \$ _____ (do NOT write an hourly, weekly, or monthly amount!)

☐ YES ☐ NO Do you have a **rental voucher** or **some other form of regular rental assistance**?

Specify: ☐ Section 8 ☐ MRVP ☐ AHVP ☐ Homebase ☐ _____

☐ YES ☐ NO Do you need a **wheelchair accessible unit** (or a "no-steps" unit)?

☐ YES ☐ NO Do you need **reasonable accommodations** due to a disability, either during the application period or tenancy? _____

☐ YES ☐ NO Are you or any member of your household subject to a lifetime registration requirement under a **State Sex Offender Registration** program?

☐ YES ☐ NO **Priority/Preference Status:** If there is a section in this application that asks about priorities and preferences, did you claim any?

Office Only: Date/Time Stamp

Viet-AID Housing Application

Please complete the following application and return it to **Vietnamese American Initiative for Development (Viet-AID), 42 Charles Street, Suite E, Dorchester, MA 02122**. All items must be completed in order to determine your eligibility. **Incomplete applications will be returned.** If an item does not apply to you, please mark "N/A" on that line. Every applicant will be required to go through a formal interview before eligibility is determined.

A. General Information - Please circle one: MR. MRS. MS. MISS

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Telephone Number: _____ E-Mail Address: _____

Unit Size: ☐ Single Room ☐ STUDIO ☐ 1BR ☐ 2BR ☐ 3BR
Please Check One: ☐ 1st floor ☐ 2nd floor ☐ 3rd floor

B. Household Composition – List all persons, including yourself, who will be living in the apartment.

Name (List Head of Household first)	Relationship	Birth Date	Social Security Number
1.	HEAD		
2.			
3.			
4.			
5.			
6.			

C. Income – All sources of regularly received monies must be listed regardless of recipient's age.

Family Member Name	Sources of Income	Amount
	Wages – Gross Monthly Amount Employer Name _____	\$
	Wages – Gross Monthly Amount Employer Name: _____	\$
	Social Security/Pension – Gross Monthly Amount	\$
	AFDC – Gross Monthly Amount	\$
	Child Support/Alimony - Monthly Amount	\$
	Interest Income - Gross Monthly Amount (i.e., interest earned from bank accounts, CD's, stocks, bonds, etc.)	\$
	Other Monthly Income	\$

D. References – Current Landlord

Name _____ Address _____ State _____ Zip Code _____ Phone Number _____ ()

Rental Began: _____ Current Rent: \$ _____ per _____

E. Previous Landlords

Name of Landlord	Address	Phone Number	Apartment Address	Period Rented
1.				From: To:
2.				From: To:
3.				From: To:

**F. Professional References (example: teachers, principals, past/present employers, clergy, physicians, etc.)
Please do not list relatives or friends.**

Name of Professional Reference	Address	Phone Number
1.		
2.		
3.		

G. Other Information

Do you have a Section 8 Voucher or any other type of voucher? Yes ☐ No ☐

Have you ever been evicted or served with a Notice to Quit? Yes ☐ No ☐ If yes, describe reason(s):

List any vehicles that you own: Yr./Make: _____ License Plate _____

Yr./Make: _____ License Plate _____

Do you own a pet? Yes ☐ No ☐ If yes, describe _____

H. Signatures

Signed: (✓) _____
Head of Household Date

(✓) _____
Spouse/Co-Tenant Date

Other adult member > 18 years of age Date

Please sign ALL black checkmarks

Authorization

I/we do hereby authorize Viet-AID and its staff to contact any agencies, offices, credit bureaus, landlords, or professional references for the purpose of verifying the information I/we have provided on the application. The information provided will be used solely for the determination of my/our eligibility and admission to the housing I/we are applying for and the information that is supplied will be kept confidential.

Signatures

(✓) _____
Applicant Signature Date

(✓) _____
Co-Applicant Signature Date

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Signatures

(✓) _____
Applicant Signature Date

(✓) _____
Co-Applicant Signature Date

Housing History, Page 1

Note: you can often locate landlord information by using the Tax Assessor's website in each town (or by calling the Tax Assessor's phone number in most towns: To determine if there is an online Tax Assessor page for a town search the web like this: "Tax Assessor, Boston MA" or "Property Assessment, Dallas TX".

CURRENT RESIDENCE

DATES YOU LIVED THERE:

Name on the lease _____ to: _____ or present

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

PRIOR RESIDENCE

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

Housing History, Page 2

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

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Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

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Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

Housing History, Page 3

RESIDENCE BEFORE THAT

DATES YOU LIVED THERE:

Name on the lease _____ to _____

Address you lived at: _____
Street and Apt# City State Zip

Landlord's Name and Address _____

Landlord Tel: _____

Did this landlord bring any court action against the leaseholder or you? ☐ Yes ☐ No

Did this landlord return your security deposit? (check one) ☐ Yes ☐ No ☐ N/A

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